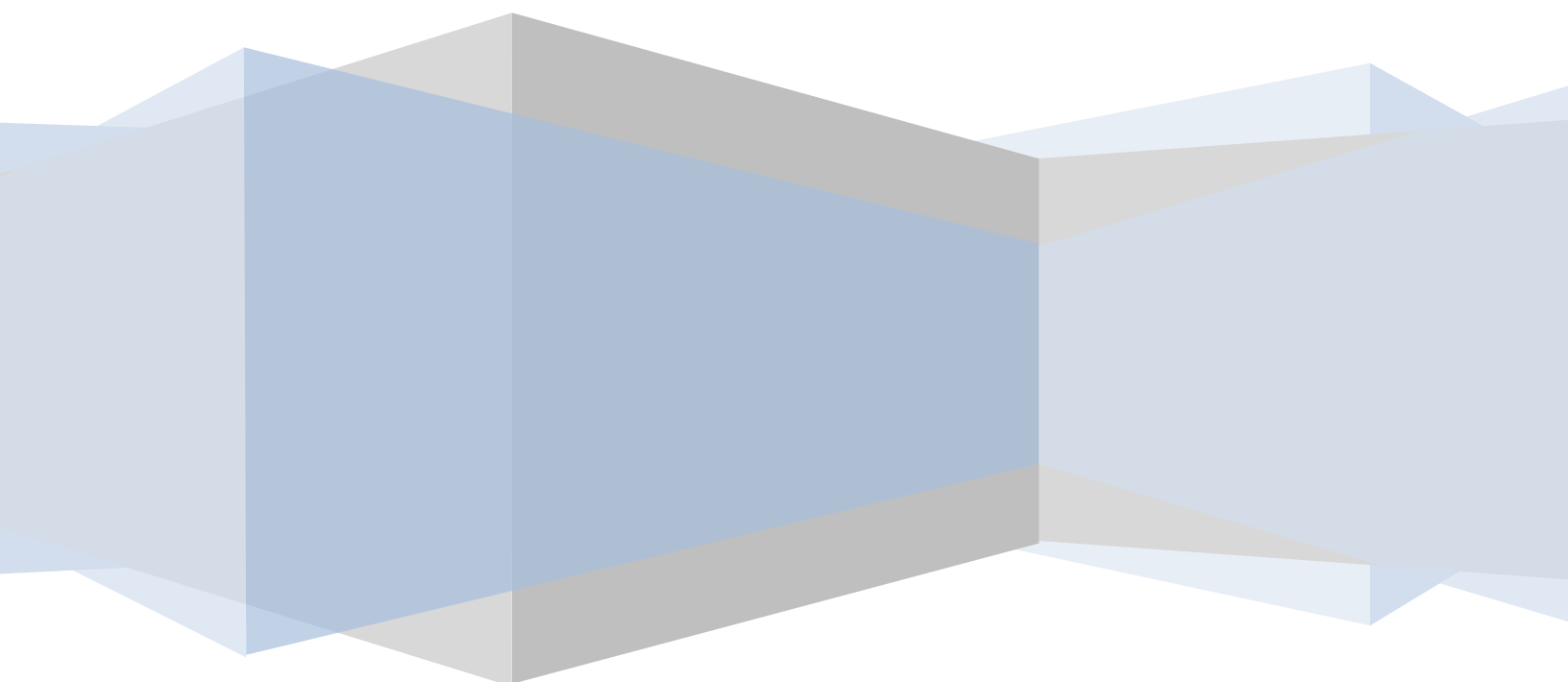


Missouri's
Comprehensive Children's Mental Health System
630.097, RSMo

(System of Care)

Annual Report
2011



Report Summary

State statute 630.097 RSMo, established a partnership between the Department of Mental Health (DMH), departments represented on the Children's Services Commission, community stakeholders and families. The legislation may be viewed at <http://www.senate.mo.gov/04INFO/billtext/SB1003.htm>

The purpose of the partnership is to develop Missouri's Comprehensive Children's Mental Health System. Implementation of the system was originally guided by the Comprehensive Children's Mental Health Five Year Plan. The plan may be viewed: <http://www.dmh.missouri.gov/diroffice/depdir/childsvcs/Final%20CCMHP.pdf>

The Five Year Plan ended in 2010. The Comprehensive System Management Team (CSMT) completed a strategic planning session to set goals for the following two years. This fall the CSMT met again to conduct strategic planning through 2013.

In 2005, Section 630.1000 RSMo, the Office of Comprehensive Children's Mental Health (Children's Office) was created within the DMH to lead the development of the Comprehensive Children's Mental Health System. The Children's Office staffs the Comprehensive System Management Team (CSMT), the Stakeholders Advisory Group (SAG) and Missouri Youth REACCH (Responding through Empowerment and Action to Create Communities of Hope) who lead the system development. The Children's Office also coordinates system consultation to the other child-serving departments that are part of the Children's Services Commission. This 2011 report summarizes the work of the Children's Office and the status of the Comprehensive Children's Mental Health System also known as the "System of Care" (SOC).

Families Retaining Custody

The Custody Diversion Protocol is working as it was intended and has prevented 96% of referrals from entering state custody.

Building Infrastructure

Eleven components contributed to building infrastructure: 1) The CSMT established a pilot State System of Care Work Group (SOC WG) to develop products per CSMT request. 2) Membership in all groups was expanded to include more parents and early childhood representation. 3) Missouri Youth REACCH explored methods to sustain their efforts after funding ends this year. 4) The "System of Care Model of Practice" was developed and distributed to all state child serving agencies. 5) Exploration occurred on how to provide stipends for family representatives. 6) The SAG continued to provide valuable input to the CSMT. 7) The Children's Office participated on the Department of Elementary and Secondary Education (DESE) grant application "Race to the Top". 8) Work with the Community Mental Health Centers resulted in continuing efforts to initiate a school mental health model that can be enhanced by Medicaid funding. 9) The number of local SOC sites expanded by two with three others expressing interest. 10) Communities of Hope, a Transformation initiative awarded contracts to community coalitions, four of which focused on children and youth issues. 11) Another Transformation initiative, Show Me Bright Futures (SMBF), supported the public health model of service delivery to prevent mental illness and promote overall wellness at the community level.

Array of Services and Supports

Highlights: 1) Staff from the Children's office served on multiple committees related to children in foster care including the "Healthy Transitions" federal grant in Jackson County. 2) Family Support Provider Training resulted in ten new family support providers. 3) The CSMT endorsed the "National Wraparound Initiative", a high-fidelity model for providing mental health services for families and children with mental health needs. 4) The Children's Office provided membership to the Governor appointed State Interagency Coordinating Council (First Steps). 5) There was ongoing participation on the Early Childhood Comprehensive System (ECCS) and the "Maternal, Infant and Early Childhood Home Visiting Program" state steering teams. 6) The Children's Office facilitated a DMH committee on the Children's Health Insurance Program (CHIP). 7) Working in partnership with other agencies, the Children's Offices assisted with a yearlong project to support families with medically fragile young children. 8) The Children's Office finalized the DMH IDEA School Compliance Agreement with DESE.

Stakeholders Are Educated

Four efforts moved forward in educating stakeholders: 1) Mental Health First Aid (MHFA) training was provided to the Moberly School District. 2) The SOC website was improved www.mosystemofcare.com. 3) The Children's Office coordinated the development of six workshops on the children's track for the annual DMH 2011 Spring Training Institute. 4) Promotional materials were widely distributed for the May celebration of "Child Mental Health Month".

Advancing the Children's Office

In June, the Divisions of Alcohol and Drug Abuse (ADA) and Comprehensive Psychiatric Services (CPS) placed all policies related to children under the direction of the Children's Office. Continuing work is occurring with the DMH Senior Management Team to further strengthen children's policy department-wide.

Other Happenings

In addition to other groups and initiatives previously noted, the Children's Office represents the DMH on other children's policy matters related to the mental health needs of Missouri's youth. Please see the full report for a list of these sixteen groups.

Future Plans

As part of the strategic plan for 2012-2013 the Children's Office will staff and oversee the CSMT, SAG, and SOC WG efforts to expand new sanctioned SOC sites; will continue incorporating SOC values and principles throughout other child-serving agencies; will monitor and update the strategic plan; and will recommend budget strategies to support the Comprehensive Children's Mental Health Plan.

Comprehensive Children's Mental Health System (System of Care) 2011 Annual Report

Content of Report	Page
Table	4
Partnership to Develop a Child Mental Health System	5
Performance and Significant Events of 2011	5
<u>Families Retaining Custody</u>	5
<u>Building Infrastructure</u>	6
Comprehensive System Management Team (CSMT)	6
Stakeholders Advisory Group (SAG)	6
State System of Care Work Group (SOC WG)	6
System of Care Model of Practice	6
System of Care Language for Working Job Descriptions and Contracts	7
Expansion of Sanctioned System of Care Sites	7
Support for System of Care Sanctioned Sites	7
Ensure Family Participation	7
School Mental Health Activities	7
Communities of Hope	7
Show Me Bright Futures (SMBF)	8
Missouri Youth REACCH	8
<u>Array of Services and Supports</u>	8
Services for Youth in Foster Care	8
Family Support Provider Training	8
National Wraparound Initiative (NWI)	8
Youth in Transition	9
First Steps	9
Recovery Supports in Joplin	9
Early Childhood	9
Children's Health Insurance Program (CHIP)	9
Children with Co-Occurring Issues	9
Medically Fragile Children	9
Children with Special Education Needs	9
Child Abuse and Neglect Prevention	9
Children with Autism	10
<u>Stakeholders Are Educated</u>	10
Mental Health First Aid (MHFA)	10
System of Care Website	10
Families as Advocates (FAA)	10
Social Marketing	10
2011 Spring Institute	10
Children's Mental Health Day	10
<u>Advancing the Children's Office</u>	10
<u>Other Happenings</u>	11
<u>Future Plans</u>	11

Vision – Mission - Values

Comprehensive System Management Team

DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION

Division of Special Education

Division of Vocational Rehabilitation

DEPARTMENT OF HEALTH & SENIOR SERVICES

DEPARTMENT OF MENTAL HEALTH

Division of Alcohol and Drug Abuse

Division of Comprehensive Psychiatric Services

Division of Developmental Disabilities

DEPARTMENT OF SOCIAL SERVICES

Children's Division

Division of MOHealth Net

Division of Youth Services

DEPARTMENT OF PUBLIC SAFETY

FAMILY REPRESENTATIVES

FAMILY-RUN ORGANIZATIONS

Families as Advocates

MPACT

NAMI Missouri

FEDERAL GRANT SITE REPRESENTATIVES

Circle of Hope

Show Me Kids

St. Charles County Partnership with Families

Youth in Transitions

JUVENILE JUSTICE SYSTEM

OFFICE OF STATE COURT ADMINISTRATORS

*Staffed by
THE OFFICE OF
COMPREHENSIVE CHILD
MENTAL HEALTH*

Vision: Assuring that Missouri's children and families receive the mental health services and supports they need.

Mission: Every child who needs mental health services and supports from the public mental health system will receive them through a comprehensive seamless system that delivers services at the local level and recognizes that children and their families come first. This system includes health, prevention, early screening, mental health consultation and direct services as needed by the child.

Values: Missouri's public mental health services system for children shall be easily accessible, culturally competent, flexible to individual needs, accountable to those it serves, and shall result in positive outcomes for children and families.

Partnership to Develop a Child Mental Health System

Missouri statute 630.097 RSMo, established a partnership between the Department of Mental Health (DMH), departments represented on the Children's Services Commission, community stakeholders and families. The legislation may be viewed at <http://www.senate.mo.gov/04INFO/billtext/SB1003.htm>

The purpose of the partnership is to develop Missouri's "Comprehensive Children's Mental Health System". Implementation of the system was originally guided by the "2004 Comprehensive Children's Mental Health Five Year Plan". The plan may be viewed: <http://www.dmh.missouri.gov/diroffice/depdir/childsvcs/Final%20CCMHP.pdf>

The Five Year Plan ended in 2010 and the Comprehensive System Management Team (CSMT) then completed a strategic planning session to set goals for the following two years. This fall the CSMT again conducted strategic planning.

In 2005, Section 630.1000 RSMo created the Office of Comprehensive Children's Mental Health (Children's Office) within the DMH to lead development of the "Comprehensive Children's Mental Health System". The Children's Office staffs the CSMT, the Stakeholders Advisory Group (SAG) and Missouri Youth REACCH (Responding through Empowerment and Action to Create Communities of Hope). Each group has a role in system development. The Children's Office also coordinates system consultation to the other child-serving departments that are part of the Children's Services Commission. This 2011 report summarizes the work of the Children's Office and the status of the "Comprehensive Children's Mental Health System" more commonly referred to as the "System of Care (SOC)".

Performance and Significant Events of 2011

Families Retaining Custody

The "Custody Diversion Protocol" established in 2005 is working well. From 2005 through July of 2011, 1051 families have been referred into this process. Of those families (1008) 96% were diverted from custody with (331) 33% of those diverted supported in their community. This protocol has been institutionalized and thus, will no longer be reported in future annual reports.

Building Infrastructure

The Office of Comprehensive Child Mental Health (Children's Office) was involved with the following initiatives.

Comprehensive System Management Team (CSMT) - The CSMT made significant accomplishments in 2011, including: (1) approved and developed the State System of Care Workgroup (SOC WG); (2) added membership from the Coordinating Board for Early Childhood (CBEC), the Children's Trust Fund (CTF) and parents; (3) developed a SOC Fact Sheet; (4) continued connecting the SOC state initiative with the Early Childhood Comprehensive System (ECCS) state initiative; (5) developed tools for recruiting additional communities to become sanctioned SOC sites; (6) began working to incorporate the "System of Care Model of Practice" into all state child-serving agency contracts and personnel expectations; (7) integrated the work of the CSMT, SAG, and SOC WG through a joint strategic planning session; (8) Endorsed "Columbia Care for Kids", an early childhood education, awareness and training campaign; (9) explored options to support the SAG "White Paper" which detailed recommendations on supporting family and youth involvement with SOC. Internally, the DMH reviewed an existing DMH Departmental Operation Regulation which describes a process to provide reimbursement for family participation on state level groups, and explored potential funding mechanisms. Additionally, the CSMT distributed the SAG Stipend White Paper to local SOC teams for their consideration and possible implementation; (10) reviewed the Five Year Plan that was submitted in 2005; (11) clarified roles and interaction of the CSMT, SAG, and SOC WG; (12) re-activated the Local Liaison Committee (LLC) to provide technical assistance to local SOC teams; (13) established an ad hoc committee to review the monitoring system titled "Quality Service Review" (QSR) and explored new funding mechanisms and/or alternative monitoring systems for local teams and the system overall.

Stakeholder Advisory Group (SAG) - The SAG continued to provide valuable input to the CSMT throughout 2011. Some of the highlights of the SAG's work in 2011 are: (1) Updated a "SAG Fact Sheet" to explain the foundation and role of the SAG; (2) developed a Leadership Institute to help families and youth serve on state and local boards and committees; (3) provided representation to the SOC WG; (4) reviewed and provided quarterly input to the work products developed by the CSMT to advance and improve mental health services for youth; (5) worked in concert with DMH staff to coordinate with the Comprehensive Psychiatric Services (CPS) Statewide Advisory Council (SAC) and other advisory groups. The SAG voted to approve the draft work products related to three areas: SOC expansion, Family Engagement, and SOC Inventory of Resources (SOC Tools). The SAG is in the process of reviewing their membership and working towards filling the open positions to make sure there is state-wide representation from family members, providers and organizations. The current members of the SAG are also working towards being more independent and renewing their "Oath of Responsibility" to ensure there is the participation necessary to do the work they are charged to do. The SAG participated in the November 2011 CSMT meeting to hear updates about the progress of the various groups and of the Children's Office.

State System of Care Work Group (SOC WG) - The SOC WG was formed in 2011 under the direction of the CSMT to work on three target areas: 1) SOC Expansion; 2) SOC Tools; and 3) Enhanced Family Engagement/Recruitment. Membership for SOC WG was recruited to represent family members and providers statewide who were from local SOC teams and in a position to support these efforts. The SOC WG began as a six month pilot, but the CSMT agreed to extend the pilot until December 2011. The Tools sub-group completed their inventory of tools by July and accepted a new project from the CSMT related to assisting local SOC teams address one or more of the five statewide trends identified in previous QSR reports.

System of Care Model of Practice – a SOC Model of Practice has been approved by the three DMH Divisions. The model guides employees' participation and expectations on the state, local, and individual child levels for SOC teams. The document was offered as a template for CSMT member agencies to use as they develop or adapt their own model of practice for participation in SOC activities.

SOC Language for Working Job Descriptions and Contracts – The CSMT developed guidelines for member agencies to incorporate into working job descriptions for employees working with SOC. The guidelines build on the “Model of Practice” which calls for modifying working job descriptions to include the vision and application of SOC values and principles. In addition, the language can be used for incorporating the vision and application in requests for proposals (RFP), contracts, new staff orientations and ongoing staff in-service. CSMT member representatives have agreed to take the language guidelines back for incorporation into their respective agencies. Furthermore, DMH will work internally to incorporate SOC values into contracts and personnel job expectations.

Expansion of Sanctioned SOC Sites - The CSMT invited local coalitions to apply for sanctioning as SOC sites. A special effort was made to invite local ECCS teams to consider participating on local SOC teams or reaching out to those who would comprise a SOC team to create a local group to meet around children’s mental health issues. As a result, two teams applied to become sanctioned: Ray County and Clay/Platte Counties and both were approved. There are now fourteen (14) sanctioned SOC sites in the state. Additionally, three communities expressed interest in becoming state sanctioned SOC Teams. Finally, the director of the Children’s Office, presented a System of Care overview to the Eastern Region Behavioral Health Network (BHN) and began a discussion about collaborative efforts.

Support for SOC Sanctioned Sites - To build on the expansion effort, The Transformation State Incentive Federal Grant awarded the Children’s Office funding to provide five regional trainings for local SOC sites. Trainings were held in 2010 in Kansas City, Kirksville, Park Hills, St. Louis, and Springfield. Based on these 2010 trainings, in 2011 a “SOC Technical Worksheet/Instruction Guide” was developed to help local sites identify their system needs. This was due to several local sites expressing a desire to address issues when not staffing cases. The worksheet guides them through the process. The Jefferson County SOC Team completed their strategic planning.

Ensure Family Participation – Family members and youth are encouraged to participate in SOC activities at all levels. Their expertise both as parents and as participants in services is valued and needed. The work should have stipends and/or expense reimbursement provided. However, most families and youth receive no reimbursement at all and may experience income loss for participating. The SAG met its strategic plan goal by developing Stipend Policy Guidelines which were adopted by the CSMT and the Transformation Working Group (TWG). The St. Louis City/County SOC site has accepted the challenge and will be offering stipends or gas cards to the families and youth who participate on its governing body.

School Mental Health Activities – The Children’s Office submitted input to the Department of Elementary and Secondary Education (DESE) for its “Race to the Top” application for federal funding. The focus was on how DMH providers could assist local school districts promote school mental health.

Secondly, the Children’s Office and the Division of Comprehensive Psychiatric Services (CPS) continued work with the Coalition of Community Mental Health Centers to design a school mental health model enhanced by Medicaid funding.

Communities of Hope – The “Communities of Hope” Initiative is a cornerstone of the state’s efforts to transform its mental health system to make it more responsive to actual need by using a public health model of service delivery. The TWG awarded eight contracts to community coalitions to expand local efforts on mental health and substance abuse issues. Four of the awards focused on children and youth issues such as substance abuse prevention, teen suicide prevention, child abuse prevention, and mental health across the lifespan. The four awards focused on children are: (1) St. Joseph Youth Alliance – St. Joseph, (2) Tri-County Mental Health Services – Kansas City: Local community/school district related teams, (3) Community of the Ozarks – Springfield/Stone County Juvenile Drug Court Team, and (4) Randolph County Caring Community Partnership – Moberly. The Communities of Hope was supported by the Transformation Initiative which ended in September 2011.

Show Me Bright Futures (SMBF) - SMBF is a mental health Transformation Initiative – managed by a state-level interagency team. This team engages communities to implement a public health model to prevent mental illness and plan for the healthy physical, social, and emotional development of children. The centerpiece of SMBF is a comprehensive set of health supervision guidelines for children from birth through age 21. Three Missouri communities – Moberly, Rolla, and Joplin – currently are participating in a three-year project to implement SMBF using a \$300,000 grant awarded by the Missouri Foundation for Health (MFH) and \$75,000 from the Transformation Initiative. (Missouri's SMBF team was selected as the winner of the "2009 Governor's Award for Quality and Productivity" in the Innovation category.) All three teams participated in a statewide SMBF Training Academy in 2011, and then decided to change the focus of the Academy training and technical assistance to meet local team needs. Each team is developing a training plan and budget for the upcoming months designed to create sustainability. Additionally, the teams met in June 2011 with the evaluator to complete the second annual evaluation survey and interview. All three teams are progressing on their second projects that focus on children in the 0-5 age range.

Due to the tornado, the Joplin team will address the impact of trauma on children through a community-wide event. The training event "Connect 2 Protect, Trauma Education & Recovery" will feature workshops and information for professionals, educators, childcare workers, parents and caregivers on providing trauma-informed care to families and children. The event is a partnership involving several community agencies. Likewise, the Rolla team will hold an event to connect parents and professionals with local resources. Rolla is also in the process of scheduling Mental Health First Aid training. The Moberly team will conduct three meetings facilitated by Dr. Ken Bopp, from the University of Missouri, to develop a new strategic plan to guide their sustainability efforts.

All three communities are managing issues using "Community Issues Management" (CIM), a website capable of creating geo-maps, integrating community assessment data, archiving progress, and facilitating cross-stakeholder work. CIM provides a collaborative tool for maintaining and sharing information within communities and across communities. Each pilot community maintains a series of electronic "notebooks" to manage their activities. The series of notebooks are organized along topics, including: (1) Archives, which houses minutes, links to resources, agendas, etc. that chronicle the work of the team, (2) Strategic Plan which contains the documents and resources related to the ongoing development and monitoring of the team's strategic plan, and (3) Projects which is the repository for assessment maps, reports, multimedia links, presentations, and the library of materials used to create and implement specific projects for SMBF. The Children's Office is exploring possibilities for expansion of CIM, a web based system to consolidate and map data.

Missouri Youth REACCH – Responding through Empowerment and Action to Create Communities of Hope (REACCH), a statewide organization of young people who provide a youth voice to mental health policy, began looking at how to sustain their efforts after grant funding ends in 2011. Primarily the talks have focused on the members joining existing local groups.

Array of Services and Supports

Services for Youth in Foster Care - Several agencies represented on the CSMT are assisting the Department of Social Services (DSS) in implementing an action plan that came out of the "Blue Ribbon Task Force Report on Youth Aging-Out of Foster Care" and in overseeing the coordination of health care for youth in foster care. To that end, the Children's Office participated on the "DSS Health Care Oversight Committee for Foster Children" and the "Youth Independence Interdepartmental Initiative" (VIII).

Family Support Provider Training – This unique service assigns a trained worker to a family whose child is receiving mental health services, usually through a community mental health center. CPS continued to train family members as family support providers. Two trainings were held which added seven new providers to the workforce in St. Charles and three in Kansas City for a total of ten new Family Support Providers.

National Wraparound Initiative (NWI) – The CSMT endorsed high-fidelity wraparound as the model for providing service planning for families and children with mental health needs. Since wraparound is a family driven, child focused process that requires integration of all available services and is based on integrity to principles that are in line with SOC values and principles, the CSMT believes that this planning process is best suited to meet the needs of families, children,

and youth who seek mental health services in Missouri. The use of the term “high-fidelity” implies adherence and faithfulness to defined practices and principles as established by the NWI. High-fidelity wraparound has been shown to provide strong positive outcomes for families, children, and youth. The CSMT is assisting CPS with various products as it works toward implementation of the practice, and the Children’s Office is participating on an intra-departmental workgroup led by CPS to link the NWI with DMH practice.

Youth in Transition - The DMH received a federal Substance Abuse and Mental Health Services Administration (SAMHSA) grant, “Healthy Transitions”, to be implemented in Jackson County. The grant will address transition-age youth with severe emotional disturbance. The Jackson County SOC team is working with community agencies on an evidence-based practice, comprehensive transition approach for these youth who are between the ages of 16-25. A state level team, required by the grant, has been convened to address state level policy issues across departments concerning this age group. The Children’s Office is providing ongoing support for the initiative.

First Steps - The Children’s Office participated in a two-day Strategic Planning Retreat for the Governor appointed State Interagency Coordinating Council (First Steps). Children’s Office staff provides a member and alternate to the Council.

Recovery Supports in Joplin – The Children’s Office assisted in facilitating quilts, cool ties, and stress pillows for Joplin residents. These were donated from the Department of Corrections (DOC) Restorative Justice Program.

Bonnie Neal, Children’s Chief Community Officer for Northwest Missouri, spent weeks helping coordinate mental health response via Ozark Community Mental Health Center in Joplin. For her efforts, Bonnie was recognized as the “DMH July Employee of the Month” and the “August State of Missouri Employee of the Month.”

Early Childhood – The Children’s Office is participating on the ECCS State Steering Team (connected with the CBEC) and is also represented on the State Steering Committee for “Maternal, Infant and Early Childhood Home Visiting Program” a federal grant received by the Department of Health and Senior Services (DHSS) to assure high-quality home visiting programs for at-risk families.

Children’s Health Insurance Program (CHIP) – The Children’s Office is facilitating a DMH committee on the Children’s Health Insurance Program (CHIP).

Children with Co-Occurring Issues - DMH implemented a protocol for coordinated service planning and offered it to other state agencies as a template for their work with children who have co-occurring issues. Additionally, the Children’s Office participated on a Division of Developmental Disabilities (DD) workgroup that revised the “ISL waiver definition” for the federal reapplication, and continues participating on an intra-DMH committee to promote coordinated service planning for children and young adults with co-occurring issues.

Medically Fragile Children- Working in partnership with DESE, the Missouri Institute of Mental Health (MIMH), the St. Louis Children’s Home Society and DD, the Children’s Office is assisting in implementation of a year-long project for medically fragile young children. The project trains families using the St. Louis Children’s Home Society “Nurturing Parenting Program,” an evidence-based best practice for medically fragile young children. The goal of this partnership is to prevent maltreatment of children. The first of two interagency policy recommendation meetings were held on April 1st. The Missouri Mental Health Foundation produced a video highlighting the success of this project.

Children with Special Education Needs – In 2011 the Children’s Office finalized the “DMH IDEA School Compliance Agreement” with DESE. In a parallel effort, DMH placement procedures were enhanced to ensure maximum efforts assisting local school districts identify youth with Individualized Educational Plans (IEPs).

Child Abuse and Neglect Prevention – Staff participated in a strategic planning meeting for Missouri Prevention Partners (MPP) and in MPP “Pinwheels for Prevention Conference” and Advocacy Day at the Capitol. The Children’s Office is continuing work with MPP to develop a plan for ongoing collaborative efforts.

Children with Autism – Assisted in developing a partnership with the DOC and St. Louis University/Cardinal Glennon Children’s Hospital to provide companion dogs for children with autism. Also facilitated an agreement with the Jefferson City Correction Center (JCCC) in providing weighted blankets and quilts to children served in Autism Centers, in Hawthorn Children’s Psychiatric Hospital, by DD Regional Offices and for children with mothers in CSTAR programs.

Stakeholders Are Educated

Mental Health First Aid (MHFA) – Fourteen individuals representing the Moberly School District were certified as MHFA instructors following a five-day instructor’s course held June 28 - July 2 in Moberly. District employees -- and eventually parents -- will take part in the 12-hour course that educates participants about mental disorders and teaches first-response techniques used with persons who may be experiencing a mental health-related crisis. The school district will serve as a pilot for the state and the nation in how this training program can work within a school setting. The Children’s Office serves on the MHFA Advisory Board.

System of Care Website - The statewide SOC website continued to make improvements to its layout and features. The website includes information of interest to all audiences within the stakeholder community, including families, youth, providers, agencies and schools; www.mosystemofcare.com. In addition, the Children’s Office page within the DMH website was redesigned dmh.mo.gov.

Families as Advocates (FAA) – FAA, a statewide family network, continued to receive funding from SAMHSA. They have been working toward connecting the small local family groups around the state. This was the fourth consecutive year they hosted an annual “Family and Youth Leadership Conference”.

Social Marketing – Staff from the Children’s Office presented a SOC Overview to a Washington University public policy graduate class and to various stakeholder groups. They also facilitated placement of five Washington University graduate students at MIMH for field studies and policy briefs.

2011 Spring Institute – The Children’s Office coordinated the development of six workshops on the children’s track at the annual DMH Spring Training Institute. The track topics were:

- An Overview of School-wide Positive Behavior Supports (PBS), Danielle Starkey, Susan Brawley, Tom Hairston
- Family Leadership Training: Learning Skills to be Effective Family Leaders, Lu Ann Reese
- Project RECONNECT: An Implementation Model for Bringing TIP to your Community
Deborah Craig, MA, Tiffany Sturdivant, MSW, LCSW, Hanni Woelk, MS, PLPC
- Navigating Rough Waters: Transition Practices for Preparing and Facilitating Young People with SED into Adulthood Roles, Wayne Munchel, LCSW
- Emergency Preparedness: New Opportunities for Strengthening Community Resilience and Helping Children and Youth, Anita Chandra, PhD
- The DMH-DOC Canine Connection in Promoting Mental Health, George A. Lombardi, Keith Schafer, EdD

Children’s Mental Health Day – “Children’s Mental Health Day” is an annual national celebration that started in Missouri two decades ago as a partnership between DMH and the Missouri Statewide Parent Advisory Network. In 2011 the Children’s Office distributed promotional materials for the May celebration of “Child Mental Health Month” and participated in various celebratory activities around the state.

Advancing the Children’s Office

In June, the Divisions of ADA and CPS placed all policies related to children under the direction of the Children’s Office. This change in division policy involved merging staff meetings and realigning reporting authority. The DMH Senior Management Team (SMT) is continuing to explore efficiencies to further enhance integration of children’s policies between all three divisions.

Other Happenings

In addition to other groups and initiatives previously addressed, the Children's Office represents the DMH on children's policy matters related to the mental health needs of Missouri's youth. These include:

- Missouri Alliance of Drug Endangered Children
- The Coalition of Community Mental Health Centers Children's Committee
- Local System of Care Teams
- Parent Link Board
- Child Abuse Review Panel
- Child & Adolescence Service Review Advisory Committee
- Juvenile Crime Enforcement Coalition
- State Adolescent Substance Abuse Coordinator Committee
- Missouri Adolescent Addiction Providers
- ADA Statewide Advisory Council
- CPS Statewide Advisory Council
- Missouri Planning Council
- Hawthorn Governing Board
- Cottonwood Governing Board
- Child Abuse Prevention and Treatment Act Grant

Future Plans

As part of the strategic plan for 2012-2013, the Children's Office will oversee the CSMT, SAG, and SOC WG efforts to:

1. expand new sanctioned SOC sites,
2. continue incorporating SOC values and principles throughout other child-serving agencies,
3. monitor and update the strategic plan,
4. recommend budget strategies to support the Comprehensive Children's Mental Health Plan.